

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213539766					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: The Virginia League for Planned Parenthood, Incorporated</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: PAULETTE M MCELWAIN 201 N HAMILTON ST RICHMOND, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 8/31/2013</p> <p>SCC ID NO: 00474940</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED			
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 201 N. HAMILTON ST</p> <p style="margin-left: 40px;">CITY/ST/ZIP: RICHMOND, VA 23221</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: GREG SUSKIND TITLE: TREASURER ADDRESS: 1404 PARK AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23220 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: top;">DIRECTOR</td> </tr> </table>			NAME: GREG SUSKIND TITLE: TREASURER ADDRESS: 1404 PARK AVENUE CITY/ST/ZIP/CO: RICHMOND, VA 23220	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME:	ELLEN BROCK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1611 POPE AVENUE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23227		
NAME:	PONJOLA CONEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1101 EAST MARSHALL STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23298		
NAME:	MARILYN ERICKSON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4608 MONUMENT AVENUE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23230		
NAME:	PAULINA HIDALGO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	4705 SADLER GREEN PLACE		
CITY/ST/ZIP/CO:	GLEN ALLEN, VA 23060		
NAME:	MINDY LOISELLE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2215 GROVE AVENUE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23220		
NAME:	VINEETA SHAH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4829 OLD MAIN STREET		
CITY/ST/ZIP/CO:	UNIT 604 RICHMOND, VA 23231		
NAME:	TOM SHIELDS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6510 EDGEHILL ROAD		
CITY/ST/ZIP/CO:	RICHMOND, VA 23226		
NAME:	MARY ZAYDE ZEUGNER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6408 ROSELAWN ROAD		
CITY/ST/ZIP/CO:	RICHMOND, VA 23226		
NAME:	KATHLEEN HOLMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9505 Cool Spring Road		
CITY/ST/ZIP/CO:	Mechanicsville, VA 23116		
NAME:	CHRISTINE ISAACS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9130 James Riverwatch Drive		
CITY/ST/ZIP/CO:	Richmond, VA 23235		
NAME:	ALINA MASSEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	803 Horsepen Road		
CITY/ST/ZIP/CO:	Richmond, VA 23229		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JENNIFER MCCLELLAN DIRECTOR 1821 Park Ave. Richmond, VA 23220	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY M. H. PRIDDY DIRECTOR 104 West Hillcrest Avenue Richmond, VA 23226	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ PAULETTE MCELWAIN	PAULETTE MCELWAIN, CEO	8/26/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			